

PTO/SB/17 (12-04)
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**\$580.00**

Complete if Known

Application Number	10/024,746
Filing Date	December 19, 2001
First Named Inventor	Michael Hock
Examiner Name	Gregory J. Strimbu
Art Unit	3634
Attorney Docket No.	4680-00001

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
☐ Deposit Account Deposit Account Number: **01.2000** Deposit Account Name: **Andrus, Scales, Starke & Sawall, LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
40	- 20	= 0	x \$0.00 = \$0.00			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
7	- 5	= 2	x \$200.00 = \$400.00			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/ 50 =	(round up to a whole number) x	= \$0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

Fees Paid (\$)

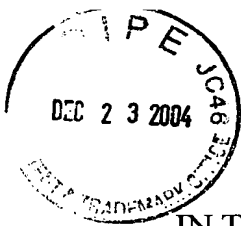
\$180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	54,180	Telephone	414-271-7590
Name (Print/Type)	Peter T. Holsen	Date	December 20, 2004		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. :	10/024,746	)	CERTIFICATE OF MAILING
Applicant :	Michael Hock	)	I hereby certify that this correspondence is
Filed :	December 19, 2001	)	being deposited with the United States Postal
Title :	LIGHTWEIGHT DOOR FOR MOTOR VEHICLES	)	Service with sufficient postage as first class
TC/A.U. :	3634	)	mail in an envelope addressed to:
Examiner :	Gregory J. Strimbu	)	Commissioner of Patents, P.O. Box 1450,
Docket No. :	4680-00001	)	Alexandria, VA 22313-1450, on this 20th
		)	day of December, 2004.
)	
		)	<i>Aleshia Prange</i> December 20, 2004
		)	Aleshia Prange Date
)	
)	

INFORMATION DISCLOSURE STATEMENT

Mail Stop: Amendment
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a PTO Form 1449 as well as a copy of the non-U.S. patent reference cited therein.

The reference is being submitted in accordance with 37 CFR 1.97(c) and the requisite fee of \$180.00 is attached hereto.

The Commissioner is hereby authorized to charge any additional fees in connection herewith to Deposit Account No. 01.2000. A duplicate copy hereof is enclosed.

It is respectfully submitted that all requirements have been fulfilled for consideration of this Information Disclosure Statement, and such action is earnestly solicited. The

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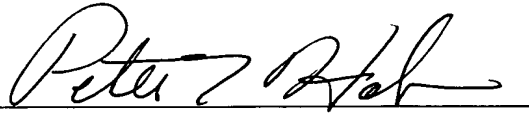
180.00 OP

Application No. 10/024,746
Attorney Docket No. 4680-00001

Examiner is invited to contact Applicant's undersigned attorney with any questions or comments, or otherwise to facilitate prosecution.

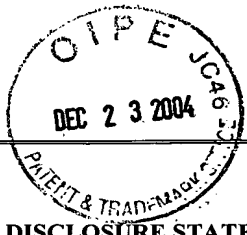
Respectfully submitted,

ANDRUS, SCEALES, STARKE & SAWALL, LLP

A handwritten signature in black ink, appearing to read "Peter T. Holsen", written over a horizontal line.

Peter T. Holsen
Reg. No. 54,180

Andrus, Sceales, Starke & Sawall, LLP
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Milwaukee, WI 53202
(414) 271-7590
Attorney Docket No: 4680-00001



Form PTO-1449	U.S. Department of Commerce Patent and Trademark Office	Atty. Docket No. 4680-00001	Appl. No.: 10/024,746
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use several sheets if necessary)		Applicant Michael Hock	
		Filing Date December 19, 2001	Group Art Unit 3634

U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

FOREIGN PATENT DOCUMENTS							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION Yes No
		EP 1 216 865 B1	10/11/2001	European			

OTHER REFERENCES (Including Author, Title, Date, Pertinent Pages, Etc.)		

EXAMINER	DATE CONSIDERED
*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to client.	